## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P08000110224

Entity Name: OM.N.G. INC

FILED Oct 19, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1722 KELLY AVENUE 1718 KELLY AVENUE

KISSIMMEE, FL 34744 OS KISSIMMEE, FL 34744 OS

**Current Mailing Address: New Mailing Address:** 

1722 KELLY AVENUE 1718 KELLY AVENUE

KISSIMMEE, FL 34744 KISSIMMEE, FL 34744 OS

FEI Number: 30-0521376 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KUMRAH, ASHWANI KUMRAH, ASHWANI 1722 KELLY AVENUE 1718 KELLY AVENUE

KISSIMMEE, FL 34744 US KISSIMMEE, FL 34744 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ASHWANI KUMRAH 10/19/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition

KUMRAH, ASHWANI KUMRAH, ASHWANI Name: Name: 1722 KELLY AV Address: 1718 KELLY AV Address:

City-St-Zip: KISSIMMEE, FL 34744 OS City-St-Zip: KISSIMMEE, FL 34744 OS

( ) Delete Title: VΡ Title: VΡ (X) Change ( ) Addition

Name: KUMRAH, VANITA Name: KUMRAH, VANITA 1722 KELLY AV Address: 1718 KELLY AV Address:

KISSIMMEE, FL 34744 OS KISSIMMEE, FL 34744 OS City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: ASHWANI KUMRAH 10/19/2009

Electronic Signature of Signing Officer or Director

Date